

115TH CONGRESS
2D SESSION

H. R. 5482

To direct the Assistant Secretary of Defense for Health Affairs to develop a plan for countering emerging and deliberate infectious disease threats, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

APRIL 12, 2018

Mr. BACON introduced the following bill; which was referred to the Committee on Armed Services

A BILL

To direct the Assistant Secretary of Defense for Health Affairs to develop a plan for countering emerging and deliberate infectious disease threats, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Military Biodefense
5 Readiness and Protection Act of 2018”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

1 (1) The 2014 Ebola crisis demonstrated the
2 need for the Department of Defense to provide a
3 prompt and efficient response to an outbreak of a
4 highly infectious disease.

5 (2) A future outbreak of an infectious disease
6 is all but certain and the lessons learned from the
7 2014 Ebola crisis are directly applicable to the next
8 crisis.

9 (3) It is critical that the Department of De-
10 fense take immediate action to ensure the joint force
11 is protected from emerging infectious diseases and
12 the potential deliberate use of infectious diseases
13 threats, while also being prepared to conduct mili-
14 tary operations in areas of increased risk as part of
15 an international response to a future public health
16 emergency.

17 (4) To ensure mission effectiveness and force
18 protection, the Department of Defense should work
19 closely with the Department of State and the De-
20 partment of Health and Human Services before,
21 during, and after an infectious disease outbreak.

22 **SEC. 3. PLAN FOR COUNTERING EMERGING AND DELIB-**
23 **ERATE INFECTIOUS DISEASE THREATS.**

24 (a) PLAN.—The Assistant Secretary of Defense for
25 Health Affairs, in coordination with the Assistant Sec-

1 retary of Health and Human Services for Preparedness
2 and Response, and in consultation with the Director of
3 the Defense Advanced Research Program Agency, the Di-
4 rector of the Office of Net Assessment, and the head of
5 the Defense Innovation Unit Experimental, shall develop
6 a plan for countering emerging and deliberate infectious
7 disease threats to ensure joint force health protection and
8 the ability of the Armed Forces to conduct operations in
9 an area subject to an emerging infectious disease threat.

10 (b) MATTERS INCLUDED.—

11 (1) FOCUS AREAS.—The plan developed under
12 subsection (a) shall address the following:

13 (A) Detection and management of patients
14 with emerging and high-consequence infections
15 identified in the R&D Blueprint Priority Dis-
16 ease List of the World Health Organization, in-
17 cluding novel emerging unknown pathogens
18 classified as “Disease X”.

19 (B) Improved point-of-care, point-of-need,
20 and next-generation early detection diagnostics
21 linked to disease surveillance, response plan-
22 ning, and information sharing networks.

23 (C) Evidence-based, best-practice clinical
24 management protocols that include pre-specified
25 data collection and analysis plans that are spe-

1 cifically tailored for enhanced survival of infec-
2 tious disease casualties and near-time data gen-
3 eration in low-resource conditions.

4 (D) Enhanced infection prevention and
5 control standards, guidelines, and training, in-
6 cluding new technologies for protecting health
7 care workers.

8 (E) Improved capability for medical evacu-
9 ation of patients with high-consequence infec-
10 tions.

11 (F) Infectious disease emergency response
12 teams to provide supplemental expertise and ca-
13 pability for dangerous pathogen infections pa-
14 tient management and movement in forward en-
15 vironments or in higher-level military medical
16 treatment facilities.

17 (G) Acceleration of research and develop-
18 ment of medical countermeasures, therapeutics,
19 and vaccines against high-consequence infec-
20 tions, including the development of clinical trial
21 networks capable of generating critical supple-
22 mental human data in support of licensure ap-
23 plications administered by the Food and Drug
24 Administration.

1 (H) Coordinated and rapid manufacturing
2 response capacity and capabilities, using re-
3 gional, flexible, scalable technologies and facili-
4 ties, leveraging successful medical counter-
5 measure development and manufacturing mod-
6 els implemented in the Department of Health
7 and Human Services and other departments of
8 the Federal Government.

9 (2) SCOPE.—For each area specified in para-
10 graph (1), the plan shall include—

11 (A) milestones and actions that can be car-
12 ried out in both the one-year and five-year
13 timeframes following the date of the plan, in-
14 cluding with respect to operations, training,
15 equipping, research, and technology develop-
16 ment;

17 (B) an identification of the element of the
18 Department of Defense to lead the Department
19 in carrying out such actions;

20 (C) the budget levels and priorities to
21 carry out such actions; and

22 (D) an identification of opportunities to le-
23 verage the experience of the Department of
24 State and the Department of Health and
25 Human Services.

1 (c) SUBMISSION.—Not later than 180 days after the
2 date of the enactment of this Act, the Assistant Secretary
3 of Defense shall submit to Congress the plan developed
4 under subsection (a), including identification of any legis-
5 lative action or administrative action required to imple-
6 ment such plan.

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